POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*W9*		4/20/99
O.I.P.E. CLASSIFIER		*10*	4-27-99
FORMALITY REVIEW	CM	71632	5/3/99
		71632	7/7/99

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	0	.... Objected

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Claim		Date
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If more than 150 claims or 10 actions
staple additional sheet here

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